

## **Deputation to the Ontario Social Policy Committee re: Bill 60, An Act to amend and enact various Acts with respect to the health system.**

On March 21, 2023, TNG Community Services' Morris Beckford, Vice President of Equity, Diversity, Inclusion and Poverty Reduction offered a strong and moving deputation to the Social Policy Committee of the Legislative Assembly of Ontario. Morris' deputation was in response to Bill 60, An Act to amend and enact various Acts with respect to the health system. The transcript of Morris' deputation is below.

Chair, Vice Chair and committee members, my name is Morris Beckford and I am the Vice President of EDI and Poverty Reduction at the Neighbourhood Group Community Services in Toronto.

The Neighbourhood Group is a social service agency which provides vital services to more than 40,000 low-income people at 32 locations in Toronto. With more than 1,000 staff and over 600 volunteers, we offer Homelessness Services, Housing, Newcomer Services, Youth Services, Employment and Training, Senior Services, Conflict Resolution and Training, Child Care and Trustee services. Our mission is to work with people at every stage of their lives, provide access to innovative and effective programs, and collaboratively build and advocate for an equitable, just, and vibrant community.

In 2021 my appendix ruptured. It was perhaps the most amazing pain I have ever felt. The level of pain is what forced me to call an ambulance, which took me to Mississauga General Hospital.

I went in on a Thursday, had major surgery and was out by Monday, good as new.

Research shows that I could have walked out of the hospital with a \$45,000 CAD bill ([Study: Appendix surgery costs differ around U.S. – CBS News](#)).

But thanks to our publicly accessible healthcare system, funded by tax dollars from me and my fellow Canadians from coast to coast, I paid a mere \$42.00 for the ambulance. Still far too much for many people.

While I think I now have access to more resources than the average Canadian, a \$45,000 bill would have caused me considerable mental and financial stress.

I have always been a supporter of public healthcare but my ruptured appendix drove home the need to not just support but to defend public healthcare.

The Ford government's latest push to drill deeper into public healthcare this time right through the heart of our public hospitals, and embed what I would call a privatization bomb, is dangerous.

This government's failure to learn from the disaster that is privatized homecare amounts to wilful blindness.

While I understand that privatization has always been in our system in some capacity, and I suppose an argument can be made that people should have the freedom to use their money to get care wherever they want, I would argue that deeper privatization is not only short-sighted, but that it is contrary to the social contract for which Canada has come to be known.

Bill 60 will put us on a path to deeper inequity because continued privatization only cares about the folks who are able to afford to get care anywhere.

According to the Ontario Health Coalition, “In Bill 60, there is no legislated protection against for-profit privatization. In fact, the Bill intends to privatize a significant portion of our core local public hospitals’ services.”

According to the Auditor General, “the ministry and OH (Ontario Health) do not have oversight procedures and systems in place to monitor and confirm the quality of specifically outpatient surgeries ...” if the government can’t even do that in the public system over which it has total control, how will it do that in a more private system where it will have to give up control?

The auditor general also found that “there is no province-wide centralized intake or referral process ... and that some hospital operating rooms are underused.” Why hasn’t the government focused on using the tools it has to reduce wait times before trying to get new ones?

I am also a college professor and last week I told one of my classes I would be coming here. I invited them to tell me what they would like me to share with you: Here are a few:

Brook wanted me to share that there are significant health inequities that already exist for racialized peoples. Privatization will do nothing to stop that.

Alessandra wanted me to share the story of her brother who last year “had a 12% chance of survival, had multiple life saving surgeries including skin grafts, and is permanently affected by an injury that escalated extremely. Almost a year later, in order to receive prescription medication to help alleviate some pain, he must pay out of pocket (and because he hasn’t worked in a year leaves that aspect challenging). He is forced to ration medication due to the high costs of these medications” Further privatization will worsen things for people like Alessandra’s brother.

Trey wanted to know why the government is stretching the already thin funding to facilitate these private companies. And would rather you invest those funding in the current system to enhance it.

Seval wants you to focus on getting more family doctors.

And Taijah wants me to tell you to “STOP privatizing healthcare and start providing resources to ensure that healthcare is affordable and accessible to marginalized communities...”

A publicly accessible healthcare system is a key part of ensuring that we prevent the province from plunging more people into deep poverty. And eating up the resources for people like me trying hard to stay in the middle class.

We already have a hard-enough time fighting poverty and helping people to keep more of their wages, deepening privatization further threatens our public system, which threatens those living in the middle class and those barely escaping deep poverty.

We call on the government to listen to reason and good sense, stop this Bill and focus on innovation within the public system to help reduce wait times and build a stronger more vibrant public health system.

Thank you.